

BY: Finance Committee

AMENDMENTS TO HOUSE BILL NO. 305

(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 10, before “defining” insert “providing that certain provisions of law related to the retroactive denial of reimbursement to a health care provider do not apply to adjustments to reimbursements made as part of an annual contracted reconciliation of a risk sharing arrangement under an administrative service provider contract;”; and in the same line strike “providing for the application of this Act;”.

AMENDMENT NO. 2

On page 2, after line 23, insert:

“(B) THIS SECTION DOES NOT APPLY TO AN ADJUSTMENT TO REIMBURSEMENT MADE AS PART OF AN ANNUAL CONTRACTED RECONCILIATION OF A RISK SHARING ARRANGEMENT UNDER AN ADMINISTRATIVE SERVICE PROVIDER CONTRACT.”;

and in line 24, strike “(b)” and substitute “(C)”.

AMENDMENT NO. 3

On page 3, in lines 4, 10, and 26, strike “(c)”, “(d)”, and “(e)”, respectively, and substitute “(D)”, “(E)”, and “(F)”, respectively; in lines 4, 5, 10, and 27, strike “(d)”, “(b)”, “(b)(1)”, and “(b)(1)(i)”, respectively, and substitute “(E)”, “(C)”, “(C)(1)”, and “(C)(1)(I)”, respectively; in line 10, after “if” insert “A CARRIER RETROACTIVELY DENIES REIMBURSEMENT TO A HEALTH CARE PROVIDER BECAUSE”; strike beginning with the first “a” in line 11 down through “because” in line 12; in lines 12 and 13, strike “or improperly coded; and” and substitute a semicolon; in line 14, strike “in the case of improper coding,” and substitute “THE INFORMATION SUBMITTED TO THE CARRIER WAS IMPROPERLY CODED AND”; in line 17, after “rendered” insert “; OR”

(Over)

(III) THE CLAIM SUBMITTED TO THE CARRIER WAS A
DUPLICATE CLAIM;

strike in their entirety lines 36 and 37; and in line 38, strike "3." and substitute "2.".